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House of Representatives

PROTECTING THE CHILD CUSTODY ARRANGEMENTS OF SERVICEMEMBERS

HON. BOB FILNER

OF CALIFORNIA
IN THE HOUSE OF
REPRESENTATIVES

Mr. FILNER. Madam Speaker, this bill, which was introduced by Mr. Turner of Ohio, a member of our committee, amends the Servicemembers Civil Relief Act to provide for the protection of child custody arrangements for parents who are members of the Armed Forces deployed in support of a contingency operation.

This measure restricts the ability of a court to order change in a custody arrangement that predates the deployment of a servicemember. It mandates that once a deployment is completed, the custody arrangements will be reinstated if changed during the deployment. The bill also requires that a court may not consider the absence of the servicemember because of deployment as a factor in determining the best interests of the child. Importantly, this bill provides courts with the ability to order a temporary custody arrangement or to prevent the reinstatement of a prior custody arrangement when the servicemember returns upon a showing of clear and convincing evidence that it is in the best interests of the child.

We are faced with a conflict between the protection of the rights of our servicemembers, which is a Federal responsibility, and child custody issues, which are traditionally within the purview of our States. I believe that Mr. Turner's bill strikes the necessary balance between these interests and provides an important

safeguard for our servicemembers and their children, and I urge my colleagues to support the measure.

Madam Speaker, we are coming to the conclusion of the 10-bill package that the Veterans' Affairs Committee presented today on the floor in anticipation of the Memorial Day holiday. We honor those whose lives were lost serving their Nation, and in their memory we have presented these 10 bills that provide a variety of benefits in all kinds of ways. And I thanked all the members of our subcommittees, but I want to thank the staff on both the majority and minority side who have participated in the drafting and the amending of these bills. It takes a lot of work from the staff, and we want to both, Mr. Buyer and I, thank them.

Madam Speaker, as I said, as we prepare for Memorial Day, I think all of us in this Congress want to assure the servicemembers who have served this Nation in the past and those who are deployed today.

We are fighting a war that is very divisive in this country and in this Congress, but we are united in saying that every young man and woman who comes back from that conflict is going to get all the care, the love, the attention, the honor, and dignity that they deserve.

They are coming back with enormous difficulties, many of them. Because of the advances in our medicine and the incredible expertise on the battlefield of those who medivac these injured out, the incredible medical teams in the forward base hospitals and the regional hospitals and in Germany, we are saving lives that in previous wars would not have been saved. If you survive a battlefield injury, you will have a 95 percent chance of surviving the war. That is an incredible statistic when compared to any other war in history.

But that means, when these soldiers come back there is a very high percentage of those with brain injury, a very high percentage of those with psychological wounds, one of which we refer to as PTSD, posttraumatic stress disorder. And we have an obligation as a Nation to treat every single one of these with the maximum quality of health care that they can get in this Nation. And yet, we have had examples of soldiers all around the Nation who have simply not gotten the attention that they require.

We have had reports of soldiers showing up to medical facilities saying they had PTSD or suicidal thoughts, being told that there was nobody to meet with them for 4 or 5 weeks, and they would go home and commit suicide. We have had lots of reports of those who did not receive adequate care. At the same time, we were not getting the full information on the numbers of cases of PTSD, the amount of resources needed to deal with them, or the number of suicides that were committed or are being committed by our Nation's veterans.

Madam Speaker, each month we have 1,000 suicide attempts by those under care of our VA system. And those under care mean only about one-fifth of all the veterans in our Nation. That is an astounding statistic which says that we have a job to do about mental health and about dealing with these, especially psychological injuries.

And we know what happens if we don't do our job right with these young men and women. We already had the canaries in the mine with our Vietnam vets. When our veterans returned from Vietnam, many of us who were opposed to that war made a mistake. We did not differentiate between the war and the warrior, and so the warriors did not get all the care, the love, the attention, the honor, and dignity that I talked about earlier. And this society has paid a heavy price for that. Individuals, families, neighborhoods have paid a heavy price. Half of the homeless on the street tonight, Madam Speaker, are Vietnam vets, about 200,000.

There have been more deaths by suicide of Vietnam vets than died in the original war by combat. And we have had the head of our mental health agency in this Nation say that the same will be probably true of Iraq; we will have more suicides than battlefield deaths.

That is not only a tragedy, but it is a preventable tragedy. We have to say that we are going to put the resources in to deal with these issues. It is part of the cost of war. As I said earlier, Madam Speaker, we are spending \$1 billion every 2 days on the war in Iraq. Surely we can spend the hundreds of millions or billions that are required to treat the mental health needs of our older veterans and our newer veterans. This is absolutely required. We must do this job and do it right.

As George Washington said, the biggest factor in the morale of our fighting troops is the sense of how they are going to be treated when they come home. We have to do a better job of treating them when they come home.

Our committee, Madam Speaker, and this Congress provided in this fiscal year and the coming fiscal year almost \$20 billion of new money for health care. That represents over a 40 percent increase in the budgets that we started off with 2 fiscal years ago. Our job is to make sure that the money is spent right, our oversight job. Now that they have the resources, are they hiring the mental health professionals? Are they doing the diagnoses and treatments?

It is absolutely apparent, Madam Speaker, that tens of thousands of our young people are getting out of the military or the Reserve or the National Guard without being adequately diagnosed for brain injury or PTSD. Let me say that again. We have tens of thousands of our young people being discharged from the military or from the Reserve or National Guard without diagnosis for PTSD or brain injury. That means tens of thousands of ticking time bombs are out on the street. We need to do a better job.

There is a stigma against adequate evaluation and early treatment. The military, or at least many members of the military, seem to give their younger troops the sense that it is not macho, it is not marine-like, it is not soldier-like to have mental illness. That it is a weakness. You have got to buck up, sergeant, and not have any mental illness. So we have folks who get a questionnaire about some of the risk factors, and they just say no. They know they are supposed to say no, because they want to be home, they don't want any influence on their future career or any possible promotion. So there is a dynamic within our military not to adequately diagnose.

The VA says they have mandatory screening for these illnesses, for these injuries when people come to the VA for treatment. Well, they may not come to the VA for treatment. We don't have an outreach that goes after every single one of them. And when they come in, they get a questionnaire by an intake clerk of two questions. Anybody who wants not to have any of the stigma of mental illness knows to say no on those two questions.

Besides, we are told there are 15 risk factors for PTSD and suicide. Why don't we ask about all of them? Why don't we have a mandatory evaluation by competent mental health personnel before anybody gets discharged or leaves the National Guard or leaves the Reserves? This has to be done, Madam Speaker. We have to get rid of the stigma and do it in a way where we allow the soldiers to do it as part of their company, for example, so they have that comradeship and with their family to help both diagnosis and treatment.

So we have a big job to do as we celebrate this Memorial Day. We have a job to do with the 1.6 million troops who have been deployed already, 800,000 of them have returned home. We have a great deal to do with the other 23 million of our veterans from previous wars.